COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No. 5255-44PUS

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

RAIL GUIDE FOR A SUSPENDEDLY GUIDED PUSH ELEMENT

the specification of which (check only one item below)

[] is attached hereto

I was filed as United States application

Serial No.

on

and was amended

on _ (if applicable).

[x] was filed as PCT international application

Number PCT/EP2004/005311

on 18 May 2004

and was amended under PCT Article 19

on _ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:									
Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)							
Germany	103 23 274.5	21 May 2003	[x] YES	[] NO					
PCT	PCT/EP2004/005311	18 May 2004	[] YES	[x] NO					
			[] YES	🛮 ио					
			[] YES	□ NO					
			[] YES	[] NO					
			[] YES	[] NO					
			[] YES	[] NO					

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)						Attorney's Docket No. 5255-44PUS			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at Cohen, Pontani, Lieberman & Pavane to prosecute this application and transact all business in the Patent and Trademark Office connected therewith Customer number 27799									
Send correspondence to Cohen, Pontani, Lieberman & Pavane at the address for the following customer Number: 27799					he D	Direct Telephone calls to: (name and telephone number) Thomas C. Pontani (212) 687-2770			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.									
	FULL NAME OF INVENTOR	FAMILY NAME KSYK		FIRST GIVEN NAME Andreas		SECOND GIVEN NAME			
2 0 1	RESIDENCE, CITTZENSHIP	CITY Edewecht		STATE OR FOREIGN COUNTRY Germany		COUNTRY OF CITIZENSHIP Germany			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Schwarzdornweg 17		CITY Edewecht		STATE & ZIP CODE/COUNTRY Germany 26188			
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME			
	RESIDENCE. CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS		СПҮ		STATE & ZIP CODE/COUNTRY			
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME			
	RESIDENCE, CITIZENSHIP	CITY		STATE OR POREIGN COUNTRY		COUNTRY OF CITIZENSHIP			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS		CITY		STATE & ZIP CODE/COUNTRY			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.									
SIGNATURE OF INVENTOR 201 SIGNATURE OF INVE				E OF INVENTOR 203					
DATE 19 17. 2005 DATE		DATE	DATE						
Additional inventor(s) name(s) & address(es) attached? [] Yes [x] No									